



27th Annual Spring Gala LA LA LA CAÑADA

Benefiting the
La Cañada Flintridge
Educational Foundation

Underwriting Opportunities

_____ I wish to be a Patron of the 2018 Gala by underwriting at the following level:
(check one)

Lanternman

\$15,000

- ◆ 10 Seats at a Premium Table
- ◆ Hotel room at The Ritz Carlton**
- ◆ VIP Lounge Access for 10
- ◆ Valet Parking for 5 cars or Transportation to/from Gala for 10 ***
- ◆ Acknowledgement in Invitation* & Bid Card

Descanso Gardens

\$10,000

- ◆ 8 Seats at a Premium Table
- ◆ Hotel room at The Ritz Carlton**
- ◆ VIP Lounge Access for 8
- ◆ Valet Parking for 4 cars or Transportation to/from Gala for 8***
- ◆ Acknowledgement in Invitation* & Bid Card

Memorial Park

\$5,000

- ◆ 4 Seats at a Premium Table
- ◆ Hotel room at The JW Marriot**
- ◆ VIP Lounge Access for 4
- ◆ Valet Parking for 2 cars or Transportation to/from Gala for 4***
- ◆ Acknowledgement in Invitation* & Bid Card

**Angeles National
Forest**

\$3,500

- ◆ 2 Seats at a Premium Table
- ◆ Hotel room at The JW Marriot **
- ◆ VIP Lounge Access for 2
- ◆ Valet Parking for 1 car or Transportation to/from Gala for 2***
- ◆ Acknowledgement in Invitation* & Bid Card

**Hahamongna
Park**

\$2,000

- ◆ 2 Seats at a Premium Table
- ◆ Valet Park for 1 car
- ◆ VIP Lounge Access for 2
- ◆ Acknowledgement in Invitation* & Bid Card

I/We are unable to attend but would like to donate \$ _____

Please include these additional guests at our table:

(Table assignments due 2/15/18)

*To ensure inclusion in all printed materials, this form & payment must be received by December 15, 2017

** Hotel room the night of 3/3/18

*** Transportation will be provided from/back to a La Canada location at a set time of night.



Auction Items

I have an item or service to donate to the auction.

Item(s): _____ **Value \$** _____

Description/conditions: _____
Exp Date: _____

Item or Gift Certificate...

_____ is enclosed _____ will be delivered _____ needs to be picked up _____ Please create Gift Certificate for me.
The above description, condition and limitations are accurate to the best of my knowledge.

Donor & Payment Information

Donor Name: _____

(as you would like it to appear in invitation and / or program)

Donor Type:

_____ Anonymous _____ Business _____ Community Sponsor _____ School Family _____ Alumni Family

Contact Name (if different): _____

Address: _____

Phone: _____ email: _____

_____ Enclosed is my check for \$ _____ (payable to LCFEF)

_____ Please charge \$ _____ to my credit card: MasterCard Visa Amex Discover

Card # _____ Exp: _____ Signature: _____

_____ Please bill me after January 1, 2018

Raffle Tickets

_____ I would like to purchase
_____ tickets @ \$50 each.

Grand Prize:

\$20,000

Cash Prize